An important new study—"The Impact of Tobacco Control Programs on Adult Smoking"—provides evidence of the direct relationship between increased funding for state tobacco prevention and cessation programs and declines in adult smoking. The study, being published in the February 2008 issue of the *American Journal of Public Health*, quantified the link between comprehensive tobacco control programs and a decrease in adult smoking, observing a decline in prevalence from 29.5 percent in 1985 to 18.6 percent in 2003.

The study examined state tobacco prevention and cessation funding levels from 1995 to 2003 and found that the more states spent on these programs, the larger the declines they achieved in adult smoking, even when controlling for other factors such as increased tobacco prices.

“These results show that if states consistently fund programs at recommended levels—outlined in *Best Practices for Comprehensive Tobacco Control Programs*—they could substantially reduce adult smoking prevalence, and thus reduce smoking-related morbidity, mortality and economic costs,” said Terry Pechacek, Ph.D., associate director for science, Office on Smoking and Health, CDC, and one of the study authors.

According to the study, if all states had started in 1995 to fund their tobacco control programs at either the minimum or optimal levels recommended by the CDC in *Best Practices for Comprehensive Tobacco Control Programs*, there would have been 2.2 million to 7.1 million fewer smokers by 2003. The Campaign for Tobacco-Free Kids estimates that such smoking declines would have saved between 700,000 and 2.2 million lives as well as between $20 billion and $67 billion in health care costs.

The study also found that increases in both tobacco control program expenditures and cigarette prices were effective in reducing smoking prevalence among adults, with tobacco control program expenditures somewhat more effective in reducing smoking prevalence among adults aged 25 or older, while increases in cigarette prices had a stronger effect on 18- to 24-year-old smokers.

As of 2005, only four states funded their programs at the minimum levels recommended by CDC, and many states have substantially reduced funding for their tobacco control programs. Overall funding for state tobacco control programs declined by 28 percent between fiscal years 2002 and 2005. As of 2007, only three states were funding their programs at the CDC–recommended levels.

The study is the first of its kind to use multi–state survey data on smoking to examine the association between cumulative state tobacco control program spending and changes in adult smoking prevalence. The study was conducted by researchers at the CDC and RTI International, an independent nonprofit research institute based in Research Triangle Park, N.C.

The research supports the conclusion of the 2000 report of the U.S. Surgeon General as well as the 2007 reports from the Institute of Medicine, the National Institutes of Health, and the President’s Cancer Panel that comprehensive state tobacco control programs are effective public health investments. The study also complements recent studies.
demonstrating that tobacco control program expenditures are associated with declines in smoking prevalence among youths and declines in per-person cigarette sales.

Resources related to this study: